

AUG 1 5 2002

510(k) SUMMARY OF SAFETY AND EFFECTIVENESS K 621776

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Devices Act (SMDA) of 1990 and 21 CFR 807.92. All data included in this document is accurate and complete to the best of KSEA's knowledge.

Application:

Karl Storz Endoscopy – America, Inc.

600 Corporate Pointe Drive Culver City, CA 90230

(310) 338-8100

Contact:

James A. Lee, Ph.D.

Senior Regulatory Affairs Specialist

Device Identification:

Common Name:

Suction/Irrigation Switch

<u>Trade Name</u>: (optional) KSEA Quadro Switch

<u>Indication</u>: The KSEA Quadro Switch, in conjunction with its associated handpiece, functions as a suction/irrigation control switch device to control the rinsing and removal of carbon deposits, blood clots, or excised tissue from operative sites during surgical procedures.

<u>Device Description</u>: The Quadro Switch is a microprocessor controlled device connected at the interface between a suction/irrigation handpiece and a legally marketed irrigation/suction pump via two separate pieces of silicone irrigation and suction tubing.

<u>Substantial Equivalence</u>: The KSEA Quadro Switch is substantially equivalent to the predicate devices since the basic features and intended uses are the similar. The minor differences between the KSEA Quadro Switch and the predicate devices raise no new questions of safety or effectiveness.

Signed:

James A. Lee, Ph.D.

Senior Regulatory Affairs Specialist



AUG 1 5 2002

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Karl Storz Endoscopy James A. Lee Senior Regulatory Affairs Specialist 600 Corporate Pointe Drive Culver City, California 90230-7600

Re: K021776

Trade/Device Name: KSEA Quadro Switch

Regulation Number: 876.1500

Regulation Name: Endoscope and accessories

Regulatory Class: Class II Product Code: KOG Dated: May 28, 2002 Received: May 29, 2002

Dear Mr. Lee:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 – Mr. James A. Lee

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure



KO21776

510(k) Number (if known):

Device Name: KSEA Quadro Switch

<u>Indication for Use</u>: The KSEA Quadro Switch, in conjunction with its associated handpiece, functions as a suction/irrigation control switch device to control the rinsing and removal of carbon deposits, blood clots, or excised tissue from operative sites during surgical procedures.

(PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use: OR Over-the-Counter Use: (Per 21 CFR 801.109)

(Optional Format 1-2-96)

(Division Sign-Off)
Division of General, Restorative
and Neurological Devices

510(k) Number <u>KOU776</u>

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